



2015 ANNUAL PROGRESS REPORT RESULTS

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BACKGROUND and PURPOSE

- **The National Syndromic Surveillance Program (NSSP) aims to promote the use of high quality syndromic surveillance data for improved nation-wide situational awareness for public health action**
- **NSSP provides funds to 31 jurisdictions**
- **This presentation will provide a summary of selected data from the grantees' Yr-1 Annual Progress Reports (APRs)**

Quantitative Analysis

DATA and ANALYSIS

- **Data source: FY 2015 Grantee APRs**
 - First annual reports (<1yr activities)
- **Assessment focus: practice related information**
- **Analysis: descriptive**
 - e.g. frequencies, means, range values
 - Used R software

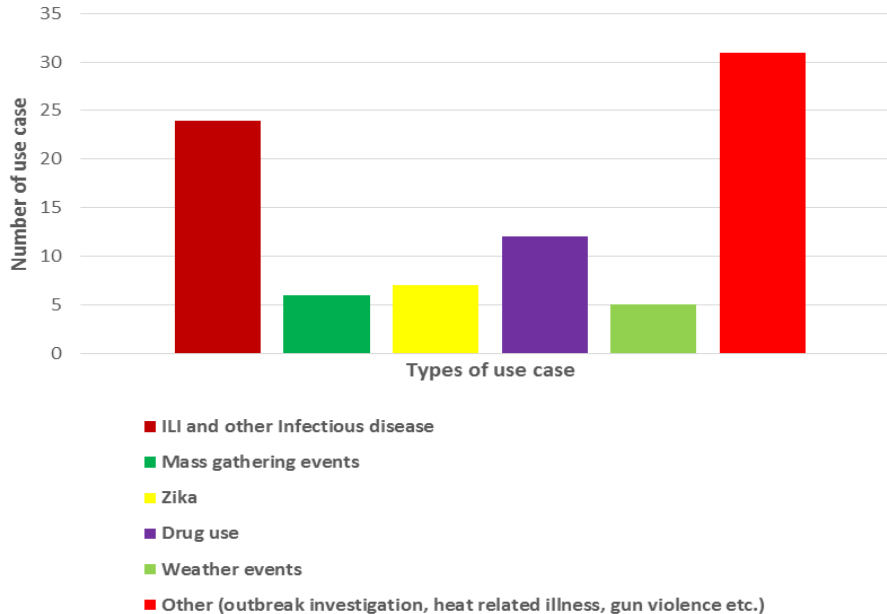
RESULTS

- Selected syndromic surveillance practices across the 31 grantees**

Performance Measures	Mean	Sd	Range	Quartile 1 (25%)	Quartile 2 (50%)	Quartile 3 (75%)	Quartile 4 (100%)	N
Number of users registered on the BioSense platform	16	19.5	0-68	3.5	8	21	68	31
Number of grantee staff participating in NSSCoP projects	2.39	3.55	0-19	0	2	3	19	31
Number of staff attending conferences	2	2.54	0-10	0	1	3	10	31
Number of staff attending trainings	1.39	1.67	0-5	0	0	3	5	31
Number of staff attending webinars	1.61	2.12	0-9	0	1	3	9	31
Number of stakeholders participating in jurisdictional workgroup	8.87	19.5	0-103	0	0	11	103	31
Number of use cases for syndromic surveillance in state/local	4.5	6.78	0-33	0	1	6	33	31
Number of hospital facilities that have achieved MU stage 2 compliance for SS	39.2	51.6	0-211	4	24	47.5	211	31

RESULTS

Types of use cases mentioned using syndromic surveillance data



Selected diseases and conditions focused on among reported used cases

- Zika
- ILI/ Fever
- Drug abuse/ substance abuse/ heroin overdose
- Carbon monoxide poisoning/ toxicity
- Enterovirus D68
- Ebola
- Varicella and measles
- Acute flaccid myelitis
- Arboviral febrile illness
- Non-communicable diseases
- Behavioral Health Syndromes
- HIV/STD
- Injuries
- Respiratory illness/ asthma
- GI illness/ Diarrheal

Qualitative Analysis

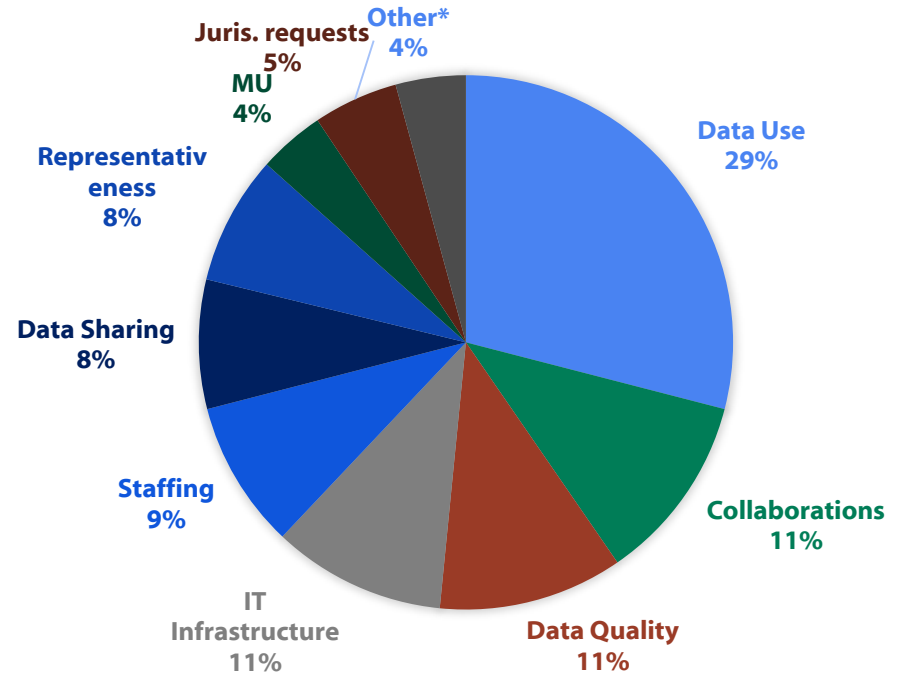
QUALITATIVE DATA ANALYSIS METHODS

- Data were pulled from the “Successes and Challenges” sections of each activity, as well as the “Success Stories” section of the APR report
- Used a thematic analysis approach to capture recurrent topics using MAXQDA.

RESULTS OVERVIEW

- **Diverse data on a wide range of topics**
 - Large amount of information on data use
 - Collaborations, data quality, IT infrastructure were also prevalent themes.

CODE FAMILY PREVALENCE



DATA USE

- **Syndromic data were used for a wide range of disease areas and health threats**
- **Jurisdictions also noted the importance of training staff to use syndromic data in day to day public health practice**

REPRESENTATIVENESS

- **Grantees reported improvements in representativeness.**
 - Though wide variations among jurisdictions still remain
- **Some jurisdictions noted finding new hospitals as a result of onboarding activities**

COLLABORATIONS

- **Awardees reported seeing increased collaborations among a variety of different intra-jurisdictional entities.**
 - E.g. Emergency preparedness, injury prevention, social services, etc.
- **Awardees are seeing inter-jurisdictional collaborations begin to expand**
 - Covering areas such as data sharing, methods development, trainings

DATA QUALITY

- **Grantees had a wide range of practices around data quality**
 - Frequency of analysis, elements checked, applications used
- **Grantees noted difficulties determining the best way to measure data quality.**
 - Requests for guidance on this issue were repeated by several jurisdictions
- **Grantees noted challenges in affecting data quality as it is largely reliant on outside entities**

CONCLUSIONS

- **Progress made towards achieving programmatic goals for representativeness, data quality, and syndromic surveillance practice**
- **Specific focuses of data use varied**
- **Encouraging increases in collaborative efforts were noticed**
- **Further standardization of performance metrics and syndromic surveillance practices would be helpful**

THANK YOU!

For more information, contact CDC
1-800-CDC-INFO (232-4636)
TTY: 1-888-232-6348 www.cdc.gov

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.